Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

09768658

TOTAL CLAIMS	CLAIMS AS FILED - PART I (Column 1)						mn 2)		SMALL ENTITY TYPE			OTHER THAN SMALL ENTITY	
TOTAL CHARGEABLE CLAIMS	TOTAL CLAIMS							Г	RATE	FEE			
NOBEPENDENT CLAIMS	FOR			NUMBER FILED		NUMB	BER EXTRA				OR		
MULTIPLE DEPENDENT CLAIM PRESENT  If the difference in column 1 is less than zero, enter "0" in column 2  CLAIMS AS AMENDED - PART II  (Column 1)  (Column 2)  (Column 3)  FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  Total  (Column 1)  (Column 2)  (Column 3)  (Column 3)  (Column 4)  (Column 4)  (Column 5)  (Column 5)  (Column 6)  (Column 7)  (Column 7)  (Column 7)  (Column 8)  (Column 1)  (Column 1)  (Column 1)  (Column 1)  (Column 1)  (Column 2)  (Column 3)  FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  Total  (Column 1)  (Column 2)  (Column 3)  (Column 3)  (Column 3)  (Column 4)  (Column 4)  (Column 5)  (Column 6)  (Column 7)  (Column 7)  (Column 7)  (Column 8)  (Column 8)  (Column 8)  (Column 1)  (Column 9)  (Column 1)  (Column 1)  (Column 1)  (Column 1)  (Column 2)  (Column 3)  FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  Total  (Column 1)  (Column 2)  (Column 3)  (Column 3)  FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  Total  (Column 1)  (Column 2)  (Column 3)  FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  Total  (Column 1)  (Column 2)  (Column 3)  FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  Total  (Column 1)  (Column 2)  (Column 3)  FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  FIRST PRE	TOTAL CHARGEABLE CLAIMS			2 Y minus 20= 1		• -4			X\$ 9=		OR	X\$18=	72
### ### ##############################	INDEPENDENT CLAIMS			∠/ minus 3 = '		* - <i> </i>			X40=		OR	X80=	<b>\$</b> 0
CLAIMS AS AMENDED - PART II	MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=	
Column 1   Column 2   Column 3   SMALL ENTITY   OR ADDITIONAL FEE   OR STAND   OR SMALL ENTITY   OR ADDITIONAL FEE   OR SMALL ENTITY   OR ADDITIONAL FEE   OR SMALL ENTITY   OR ADDITIONAL FEE   OR STAND   OR SMALL ENTITY   OR ADDITIONAL FEE   OR ADDITI	* If	the difference	in column 1 is	ess than zero, enter "0" in column 2				OTAL		OR	TOTAL	862	
CCAIMIS   HIGHEST   PRESENTATION OF MULTIPLE DEPENDENT CLAIM   Minus	CLAIMS AS AMENDED - PART II												
REMAINING   REMAINING   RATE   RATE   TIONAL   FEE							(Column 3)	5	MALL		OH	SMALL	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	AMENDMENT A		REMAINING AFTER		NUM PREVI	IBER OUSLY			RATE	TIONAL		RATE	TIONAL
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			*		**		=		X\$ 9=		OR	X\$18=	
+135			*	L		T CL AINA	]=		X40=		OR	X80=	
Column 1)		FIRST PRESE	NIATION OF MI	ULTIPLE DEF	ENDEN	CLAIIVI		1	-135=		OR	+270=	
Column 1			9.00					AD			OR	TOTAL ADDIT. FEE	1 1 82
REMAINING AFTER AMENDMENT  Total  Total  **Minus  ****  Independent  **GOLUMN 1)  **Column 2)  **Column 2)  **Column 3)  **Column 3)  **Column 1)  **Column 1)  **Column 2)  **Column 2)  **Column 3)  **Column 3)  **Column 4)  **Total  **Total  **Minus  ***  **Column 2)  **Column 3)  **Column 3)  **Column 3)  **Column 3)  **Column 4)  **Total  **Total  **Minus  *											0	•	
HRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	AMENDMENT B		REMAINING AFTER		NUM PREVI	IBER OUSLY			RATE	TIONAL		RATE	TIONAL
HRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM		Total	*	Minus	**			,	X\$ 9=		OR	X\$18=	
+135= OR +270=     TOTAL ADDIT FEE			*			F.C.LAINA	=		X40=		OR	X80=	
Column 1) (Column 2) (Column 3)  CLAIMS REMAINING AFTER AFTER AMENDMENT PREVIOUSLY PAID FOR  Total  Total  Minus  **  FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  **  If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  **  If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  **  If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT FEE  ADDIT FEE  ADDIT FEE  ADDIT FEE  ADDIT FEE  OR ADDIT FEE  OR ADDIT FEE  OR ADDIT FEE  ADDIT FEE  OR ADDIT FEE  ADDIT FEE  OR ADDIT FEE  ADDIT FEE  OR ADDIT FEE		FINST PRESE	NIATION OF INC	JLIIPLE DEF	CINDEIN	CLAIM		+	-135=		OR	+270=	
CLAIMS REMAINING AFTER AMENDMENT  Total  Total  * Minus  ** =								ADI			OR		
CLAIMS REMAINING AFTER AMENDMENT  Total  Total  * Minus  ** =		·	(Column 1)		(Colu	mn 2)	(Column 3)						
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."	NDMENT C		CLAIMS REMAINING AFTER		NUM PREVI	BER OUSLY		F	RATE	TIONAL		RATE	TIONAL
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  * ADDIT FEE		Total	*	Minus	**		=	>	(\$ 9=		OR	X\$18=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  * ADDIT FEE	AME	·	*	<u> </u>			=	,	K40=		OR	X80=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT FEE		HIRST PRESE	NTATION OF ME	JLTIPLE DEF	ENDEN	CLAIM		+	135=			+270=	
	** !	f the "Highest Nu	mber Previously Pa	aid For" IN THI	S SPACE i	s less tha	n 20, enter "20."	ADE			OR I		